CLAIMS AS FILED - PART I (Column 1) (Column 2) TYPE	LL ENTITY		,	
		OR-	OTHER	
TOTAL CLAIMS	ATE FEE	1_[RATE	FEE
FOR NUMBER FILED NUMBER EXTRA BASI	C FEE 370.00	OR B	ASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS minus 20= * X\$	9=	OR	X\$18=	
INDEDENDENT OF VIVO	12=	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT	40=	1 T	+280=	
* If the difference in column 1 is loss than zero, enter "0" in column 2		}~``L		
CLAIMS AS AMENDED - PART II	TAL	OR	TOTAL [THAN
	ALL ENTITY	OR	SMALL E	1
CLAIMS REMAINING AFTER AMENDMENT Total Tot	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total * 49 Minus * 5/ = 2 X\$	9= '	ÓR	X\$18=	\
Independent + 4 Minus +++ 4 = X4	2=	OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +14	40= _.	OR	+280=	1
ADDIT.	OTAL	OR A	TOTAL DDIT. FEE	-
(Column 1) (Column 2) (Column 3)	. FEE	. ^	DDII. FEE E	
CLAIMS HIGHEST PRESENT NUMBER PRESENT	ADDI- TE TIONAL FEE		RATE	ADDI- TIONAL FEÈ
AFTER AMENDMENT PREVIOUSLY EXTRA Total * 49 Minus ** 51 = 5 X\$ Independent * 4 Minus ** 4	9=	OR	X\$18=	1
Independent 4 4 Minus 4** 4 = 5 X4	2=	OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +14	10=	-	+280=	
10-11-05 ADDIT.	OTAL	L	TOTAL DDIT. FEE	-
(Column 1) (Column 2) (Column 3)		· ?	DDIT. TEL	
CLAIMS REMAINING AFTER AMENOMENT Total Independent CLAIMS REMAINING AFTER AMENOMENT	ADDI- TE TIONAL FEE	ſ	RATE	ADDI- TIONAL FEE
Total 4 4 (0 Minus ** 1 5) = X		OR	X\$502	
Independent + 5 Minus +++ 4 = 1			X300	200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		OR _		100
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.		OR	+280=	
	OTAL	OR ,	TOTAL DDIT. FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT.	. FEE L	Αt		1

Application or Docket Number